STATEMENT OF

FORM 1	ORGANIZ (See instruct			Office use only
1. NAME OF COMMITTEE (in	full) (Check if name is changed)	Example: If typying, type over the lines	12FE4M5	
Duffy for Con	gress			
ADDRESS (number and	street) PO Box 538			
(Check if address is changed)				
	Wausau 		WI [54402 _ 0538
		CITY▲	STATE▲	ZIP CODE 📥
COMMITTEE'S E-MA	IL ADDRESS (Please provide only one	•		
(Check if address is changed)	info@duffyforcong	ress.com		
COMMITTEE'S WEB	PAGE ADDRESS (URL)			
(Check if addres				
is changed)				
2. DATE 0 2				
3. FEC IDENTIFICA	ATION NUMBER	C C00464339		
4. IS THIS STATEM	MENT NEW (N) OR	X AMENDED (A	N)	
I certify that I have exam	ined this Statement and to the best of my k	nowledge and belief it is true, corr	ect and complete	
T	Treasurer Michael Maste	reon		
Type or Print Name of	reasurer			
Signature of Treasure	Electronically Filed by Michael	Masterson	Date 0 2	7 2 4 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
NOTE: Submission of fa	lse, erroneous, or incomplete information n	nay subject the person signing thi	·	
Office Use Only		For further informa Federal Election Co Toll Free 800-424-9	mmission 530	FEC FORM 1 (Revised 02/2009)